| | PATENT A | PPLICATIO Effect | RÐ | | 10/6 | 08 | P30C LMOS |) | | | | | |
|---|--|---|------------------|------------------------------|--------------------------------|------------------|--------------|-------------------|------------------------|-------|---------------------|------------------------|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | | OTHER THAN | | |
| TOTAL CLAIMS | | | 29 | | | RA | ΓE | FEE | | RATE | FEE | | |
| FOR | | | NUMBER FILED N | | NUMBE | REXTRA | Basic Fee | | 375.00 | OR | basic fee | 750.00 | |
| TOT | TAL CHARGEA | BLE CLAIMS | 29 minus 20= * 9 | | | | X\$ | X\$ 9= | | OR | X\$18= | 162 | |
| INO | EPENDENT CL | AIMS | 3 minus 3 = " m | | | | X4: | X42= | | OR | X84= | | |
| MUH | TIPLE DEPEN | DENT CLAIM P | RESENT | NT 🔲 | | | | +140= | | OR | +280= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOI | TOTAL | | OR | TOTAL | 917 | | |
| 6-30-65 CLAIMS AS AMENDED - PART II | | | | | | | | | <u> </u> | | OTHER | THAN | |
| b - | (Column 1) (Column 2) (Column 3) | | | | | | SM | ALL | ENTITY | OR | SMALL | | |
| NTA | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVI PAID | BER | PRESENT EXTRA | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| AMENDMENT | Total | - 19 | Minus | ** 6 | 29 | = Q | X\$ | 9= | 1 | OR | X\$18= | <i>j</i> | |
| ME | Independent | • 3 | Minus | *** | 3 | = 0 | X4 | 2= | Y | OR | X84= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +14 | 0= | 1 | OR | - X | | |
| | | | | • | | | ADDIT | OTAL FEE | 1 | OR | TOTAL ADDIT. FEE | | |
| | | (Column 1) | | | mn 2) | (Column 3) | | | , | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | PREVI | HEST HBER HOUSLY FOR | PRESENT | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | ** | | = | X\$ | 9= | | OR | X\$18= | | |
| | Independent | * | Minus | *** | T C(A(A) | = | X4 | 2= | | OR | X84= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +14 | 0= | | OR | +280= | | |
| | | 16 | · | | | | ADDIT | OTAL | | OR | TOTAL ADDIT. FEE | • | |
| | | (Column 1) | | (Colu | ımn 2) | (Column 3) | | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | NUM | HEST MBER IOUSLY OFOR | PRESENT | RA | TE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | |
| | Total | * | Minus | 林 | | * | X\$ | 9= | | OR | X\$18= | | |
| | Independent | * | Minus | *** | | • | X4 | 2= | | OR | X84= | | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 10 | | 1 | 000 | | |
| 1 *** | If the Thinhest No | mm 1 is less than umber Previously | Paid For IN Th | #S SPACE | is less tha | n 20, enter *20 | +14 ADDIT | OTAL | | OR | TOTAL | | |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT, FEE ADDIT, FEE THighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | F COMMERC | |

*U.S. Government Priming Office: 2003 -- 498-278/89151

FORM PTO-878 (Rev. 12/02)